



# COMPOSITE SCIENCE MINOR EQUIVALENCY ENDORSEMENT

NORTH DAKOTA EDUCATION STANDARDS AND PRACTICES BOARD

SFN 58253 (07-2008)

Social Security Number		Date of Birth		ND Teaching License Number	
Work Telephone Number				Email Address	
Home Telephone Number					
Last Name		First Name		M.I.	Maiden Name
Mailing Address			City		State Zip (9 digit)

**Prerequisite:** Valid North Dakota Educator's professional license with a secondary major.

**Re-education Plan:** To be qualified to teach at the secondary level, you must also pass the Praxis II test.

**Endorsement Request and Verification:** Once the requirements have been completed, request this endorsement be added to your license by returning this form to ESPB along with your official transcripts and verification of experience.

**Fees:** If you wish to add this endorsement between renewals, a non-refundable fee of \$75 must be enclosed. There is no additional fee to add this endorsement at your normal license renewal time.

**Timeline:** All requirements must be met before adding this endorsement to your license. The addition of this endorsement does not change your regular license renewal date.

## Composite Science Minor Equivalency Program of Study

All coursework must be verified through official transcripts from a state-approved college of teacher education.

**ME 24 requirement: minimum of 24 SH** of content-specific coursework beyond the introductory level.

Coursework	Completed (SH)	Needed (SH)
8 SH Biology beyond first year courses including labs		
8 SH Chemistry beyond first year courses including labs		
8 SH Physics beyond first year courses including labs		
8 SH Earth Science beyond first year courses including labs		
Methods of Teaching Science		
	<b>Total SH</b>	<b>Total SH</b>
To be qualified at the high school level you must complete the Composite Science Praxis II Test Code 10435 (cut score 150)	<b>Test Score</b>	

Applicant:	Date
ESPB Reviewed by:	Date
Executive Director, ESPB	Date
License Code <b>13047</b>	Type of Equivalency <b>08 / 04</b>
Level of Preparation <b>10</b>	

**Submit completed form and \$75 fee to:**

Education Standards & Practices Board, 2718 Gateway Ave, Suite 303, Bismarck, ND 58503-0585, (701) 328-9641 office (701) 328-9647 fax

In compliance with the Federal Privacy Act of 1974, the disclosure of the individual's social security number on this form is mandatory pursuant to North Dakota Century Code (NDCC) 43-50-02. The individual's social security number is used by the Education Standards and Practices Board (ESPB) as an identification number for file control purposes, background checks, and recordkeeping. ESPB does not advocate, permit, nor practice discrimination on the basis of sex, race, color, national origin, religion, age, or disability as required by various state and federal laws.



## Payment/Credit Card Information

Type of Payment <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Check		Amount \$	
Name as it appears on credit card		Please sign to authorize credit card charge	
Credit Card Number		Expiration Date	3 digit CVV number on back of card